

Application Data Sheet**Application Information**

Application Type::	Regular
Subject Matter::	Utility
Suggested classification::	
Suggested Tech. Center::	
CD-ROM or CD-R?::	None
Number of CD disks::	
Number of Copies of CDs::	
Sequence Submission::	
Computer Readable Form (CRF)::	
Number of copies of CRF::	
Title Line One::	Parametric Fitting of a Cochlear Implant
Title Line Two::	
Docket Number::	COCH-0131-US1
Request for Early Publication::	No
Request for Non-publication::	No
Suggested Drawing Figure::	
Total Drawing Sheets::	18
Small Entity::	No
Latin name::	
Variety denomination name::	
Petition included?::	No
Petition Type::	
Licensed US Govt. Agency ::	
Contract or Grant Numbers One::	
Contract or Grant Numbers Two::	
Secrecy Order in Parent Appl.::	No

Applicant Information

Applicant One Authority Type::	Inventor
Primary Citizenship Country::	Australia
Status ::	Full Capacity
Given Name::	Guido
Middle Name::	F.
Family Name::	Smootenburg
Name Suffix::	
City of Residence::	Utrecht
State or Prov. of Residence::	
Country of Residence::	Netherlands
Mailing Address Line One::	Heidelberglaan 100
Mailing Address Line Two::	
City of Mailing Address::	Utrecht
State or Province of Mailing Address::	
Country of Mailing Address::	Netherlands
Postal or Zip Code of Mailing Address::	NL-3584-CX

Correspondence Information

Correspondence Customer Number:: 22,506
Name:: Jagtiani + Gutttag
Street of mailing address:: 10363-A Democracy Lane
City of mailing address:: Fairfax
State or Province mailing address:: VA
Country of mailing address:: US
Postal or Zip Code of mailing address:: 22030
Phone Number:: 703-591-2664
Fax Number:: 703-591-5907
E-Mail Address:: iplaw@jagtiani.com

Representative Information

Representative Customer Number:: 22,506

Domestic Priority Information

Application::	Continuity Type::	Parent Application::	Parent Filing Date::
This application	National Stage of	PCT/AU2003/000804	06-26-03

Foreign Application Information

Country::	Application number::	Filing Date::	Priority Claimed::
Australia	PS 3182	06-26-02	Yes

Assignee Information

Assignee name::
Street of mailing address one::
Street of mailing address two::
City of mailing address::
State or Province of mailing address::
Country of mailing address::
Postal or Zip Code of mailing address::